

There are many elements to SMART. It calls for fighting terrorism and stopping the spread of weapons of mass destruction through stronger multilateral relationships and improved intelligence. It demands that the United States live up to its nuclear non-proliferation commitments. It would redirect money we are spending on obsolete Cold War weapons toward homeland security and energy independence. But perhaps most important of all, it is a humanitarian program designed to improve living conditions in troubled regions of the world, to address the oppression and the deprivation that often give rise to terrorism in the very first place. That means supporting programs that promote sustainable development; human rights education; peaceful conflict resolution, educational opportunities, particularly for women and girls; and democracy building.

It is time for the United States to actually put its money where its mouth is on promoting democracy.

The SPEAKER pro tempore. Under a previous order of the House, the gentlewoman from Tennessee (Mrs. BLACKBURN) is recognized for 5 minutes.

(Mrs. BLACKBURN addressed the House. Her remarks will appear hereafter in the Extensions of Remarks.)

MEDICARE PART D

Mr. FITZPATRICK of Pennsylvania. Mr. Speaker, I ask unanimous consent to claim the time of the gentlewoman from Tennessee.

The SPEAKER pro tempore. Is there objection to the request of the gentleman from Pennsylvania?

There was no objection.

The SPEAKER pro tempore. Under a previous order of the House, the gentleman from Pennsylvania (Mr. FITZPATRICK) is recognized for 5 minutes.

Mr. FITZPATRICK of Pennsylvania. Mr. Speaker, as we stand here on this Chamber floor, thousands of seniors in my district and millions across our country are suffering through piles of Medicare drug plan offers; and in far too many cases, these seniors are faced with a difficult dilemma. They are suffering under the weight of too much information, with too little time in which to make a choice on what drug plan they will use under the Medicare prescription drug program.

□ 2015

Their decision is by no means simple. The drug plans our seniors choose will define their health care options for years to come. If they do not make a decision and wait until the May 15 deadline passes, they will face penalties and higher prices for the drugs that they need.

This week the Bucks County Courier Times, a daily paper in my district in Pennsylvania, mentioned the drug pro-

gram dilemma faced by one senior. Mary Ann Morgan was fighting through the details and complications of the new program. She said, "It's the same as if you're going to buy a stock. The fine print is hard to figure out."

Traditionally, Medicare's assurance has been that for the elderly and persons with disabilities that they will not be alone when confronted with the full burden of their health care costs. However, the Medicare prescription drug benefit has changed, and if the nearly 3,000 seniors I have met through 12 town halls can represent a sample of opinion, many seniors do not yet understand the prescription drug program and do not plan to sign up for coverage.

Despite the administration's long public information campaign, for many months polls have consistently indicated only 37 percent of those eligible for Medicare say they only partially understand the program. Sixty-one percent state they simply do not understand the program. Approximately one in four seniors, 24 percent, say they plan to join the program, while 54 percent say they do not plan to join, and 22 percent have no opinion.

The U.S. Department of Health and Human Services projected that 39.1 million Medicare beneficiaries would have creditable prescription drug coverage for 2006. Of this total, HHS projected that 29.3 million beneficiaries would be enrolled in part D plans, and nearly 10 million beneficiaries would have creditable drug coverage under qualified plans such as employer- or union-sponsored plans.

Mr. Speaker, the most recent enrollment figures released just last month indicate that only 19.7 million beneficiaries are enrolled in a Medicare part D prescription drug plan, a number that falls short of the hoped for estimate of 29.3 million. This rate of enrollment cannot be viewed as a success. Members of Congress must act to modify the original plan.

Mr. Speaker, I contend that there is a simple solution to this problem. Our seniors need more time, and Congress should provide it to them. Congress changed Medicare to give our seniors more choice in what has historically been a highly structured government program. Congress cannot in good conscience allow thousands of seniors to suffer penalties simply because they could not make an informed decision for their health care coverage and do so in time.

It is for these reasons that I introduced H.R. 4399, legislation that will extend the initial year's enrollment period an additional 6 months, until November 14, 2006. My legislation would also extend the enrollment period for an additional 4½ months for all subsequent years. And, finally, under my legislation penalties would be suspended for 2 years when seniors enroll late in the program.

I call on my colleagues to join as a cosponsor of H.R. 4399 to give Mary Ann Morgan and thousands of seniors

like her more time to make the best use of the choice that they have been given.

The SPEAKER pro tempore (Mr. DENT). Under a previous order of the House, the gentleman from Ohio (Mr. BROWN) is recognized for 5 minutes.

(Mr. BROWN of Ohio addressed the House. His remarks will appear hereafter in the Extensions of Remarks.)

ROGER TOUSSAINT AND PUBLIC EMPLOYEE PENSION BENEFITS

Mr. OWENS. Mr. Speaker, I ask unanimous consent to claim the Special Order time of the gentleman from Ohio (Mr. BROWN).

The SPEAKER pro tempore. Is there objection to the request of the gentleman from New York?

There was no objection.

The SPEAKER pro tempore. Under a previous order of the House, the gentleman from New York (Mr. OWENS) is recognized for 5 minutes.

Mr. OWENS. Mr. Speaker, Roger Toussaint, the president of Local 100 of the Transport Workers Union, is in jail in New York City tonight. Toussaint's crime is that he took a stand against New York Governor Pataki's sneak attack on public employee pension benefits. When the Governor's puppet appointees on the New York Metropolitan Transport Authority Board had already reached agreement on all other items during labor contract negotiations, the Governor ordered that a cut in pension benefits be added as a new demand. Although it was a cut proposed for the future employees, Roger Toussaint said, "No. I will not be a party to an agreement that sells out the unborn."

Roger Toussaint would not allow the Governor to set a precedent for all future State, city, county, and later on it would spill over to Federal employees, and they would have shoved in their face at the bargaining table this precedent of having cut public employee pension benefits. A domino effect would roll right across the entire Nation, and no public employee pension benefits would be safe. "Strike" was the rallying cry at that moment, and that rallying cry deserves the support of all working families across the Nation.

The private sector, the corporate butchers, have been carving up private employee pension benefit funds for some years now. Indeed, those of us who serve on the Education and Workforce Committee know that there is an impending pension bankruptcy crisis which may produce shock waves similar to the savings and loan scandal. Private pension benefits for workers we know are endangered, but we have all assumed repeatedly that pensions for public employees are safe, they are secure.

Roger Toussaint's confrontation with the Metropolitan Transit Authority dramatically exposes the fact that public employee pension benefits are also